Fill in this information to identify your case:		olsendaines.com
United States Bankruptcy Court for the:		
DISTRICT OF OREGON	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this an amended filing

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Christopher First name  Dale Middle name  Gonzales Last name and Suffix (Sr., Jr., II, III)	Carla First name  Denise Middle name  Gonzales  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		Carla Duffy Carla Velez
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4756	xxx-xx-2272

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		900 Silver Fox Drive				
		Central Point, OR 97502  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Jackson				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

	otor 1 Christopher Dale G Carla Denise Gonz				Case number (if known)				
Par	t 2: Tell the Court About	Your Bankruptcy	Case						
7.	The chapter of the Bankruptcy Code you are		a brief description of each, se o, go to the top of page 1 and		y 11 U.S.C. § 342(b) for Individuals Filing for Banate box.	kruptcy			
	choosing to file under	☐ Chapter 7							
		☐ Chapter 11	☐ Chapter 11						
		☐ Chapter 12							
		Chapter 13							
8.	How you will pay the fee	about how order. If yo a pre-printe	you may pay. Typically, if you ur attorney is submitting your ad address. ay the fee in installments. I	are paying the fee payment on your be f you choose this op	eck with the clerk's office in your local court for mo yourself, you may pay with cash, cashier's check, shalf, your attorney may pay with a credit card or c	, or money check with			
		I request to but is not reapplies to y	equired to, waive your fee, an rour family size and you are u	may request this opt ad may do so only if unable to pay the fee	ion only if you are filing for Chapter 7. By law, a ju your income is less than 150% of the official pove in installments). If you choose this option, you mu ficial Form 103B) and file it with your petition.	rty line that			
9.	Have you filed for bankruptcy within the	■ No.							
	last 8 years?	☐ Yes.							
		Distric	t	When	Case number				
		Distric	t		Case number				
		Distric		When	Case number				
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
		Debto	r		Relationship to you				
		Distric	t	When	Case number, if known				
		Debto	r		Relationship to you				
		Distric		When	Case number, if known				
11.	Do you rent your residence?	□ No. Go to	o line 12.						
	. Journal of the control of the cont	■ Yes. Has	your landlord obtained an evi	ction judgment agai	nst you?				
			No. Go to line 12.						
			Yes. Fill out <i>Initial Stateme</i> bankruptcy petition.	ent About an Evictio	n Judgment Against You (Form 101A) and file it w	ith this			

	otor 1 Christopher Dale Gotor 2 Carla Denise Gonz				Case number (if known)		
Par	t 3: Report About Any Bu	ısinesses	You Owi	n as a Sole Proprie	tor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	e and location of bus	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any  Number, Street, City, State & ZIP Code			
	If you have more than one sole proprietorship, use a separate sheet and attach			•			
it to this petition.  Check the appropriate box to describe your business:  Health Care Business (as defined in 11 U.S.C. § 101(27A))					•		
					Estate (as defined in 11 U.S.C. § 101(51B))		
				•	efined in 11 U.S.C. § 101(53A))		
					r (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline	s. If you in ns, cash-f	ndicate that you are low statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure		
	For a definition of small	■ No.	I am	not filing under Chap	oter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Pari	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention		
	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?			
					Number, Street, City, State & Zip Code		

#### Part 5:

#### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

■ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	tor 1 Christopher Dale G tor 2 Carla Denise Gonz				Case number	(if known)			
Part	6: Answer These Quest	ions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily consur individual primarily for a personal,			ed in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	<b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe th	at are not consur	mer debts or business	s debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go	to line 18.					
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative exper are paid that funds will be available to distribute to unsecured creditors?						
	administrative expenses		□ No	□ No					
are paid that funds will be available for									
18.	How many Creditors do	<b>■</b> 1-49		<b>1</b> ,000-5,000		<b>1</b> 25,001-50,000			
	you estimate that you owe?	☐ 50-99 ☐ 100-1 ☐ 200-9	99	□ 5001-10,000 □ 10,001-25,0		☐ 50,001-100,000 ☐ More than100,000			
19.	How much do you estimate your assets to	<b>\$0 - \$</b>		<u></u> \$1,000,001		□ \$500,000,001 - \$1 billion			
	be worth?		01 - \$100,000	□ \$10,000,001 □ \$50,000,001		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million			01 - \$500 million	☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$50,000 ■ \$50,001 - \$100,000		<b>\$1,000,001</b>		□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?			□ \$10,000,001		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
					1 - \$100 million )1 - \$500 million	☐ More than \$50 billion			
Part	:7: Sign Below								
For	you	I have ex	camined this petition, and I declare u	under penalty of p	perjury that the inform	ation provided is true and correct.			
			chosen to file under Chapter 7, I am tates Code. I understand the relief a			under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.			
			rney represents me and I did not pant, I have obtained and read the noti			an attorney to help me fill out this			
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				ified in this petition.					
		bankrupt and 357	ccy case can result in fines up to \$25 1.		onment for up to 20 ye	property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,			
			stopher Dale Gonzales oher Dale Gonzales		/s/ Carla Denise C				
			e of Debtor 1		Signature of Debtor				

Executed on October 4, 2019 MM / DD / YYYY

Executed on October 4, 2019 MM / DD / YYYY

Debtor 1	Christopher Dale Gonzales		
Debtor 2	Carla Denise Gonzales	Case number (if known)	
		-	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Matthew A. Casper	Date	October 4, 2019
Signature of Attorney for Debtor	_	MM / DD / YYYY
M (II) A O		
Matthew A. Casper		
Printed name		
OlsenDaines		
Firm name		
PO Box 12829		
Salem, OR 97309		
Number, Street, City, State & ZIP Code		
()		
Contact phone (503) 362-9393	Email address	
062903 OR		
Bar number & State		

Fill in	this information to identify your case:			olsendaines.com
Debto	- Chilotophici Bale Genzalee			
Debto	First Name Middle Name Last Name  or 2 Carla Denise Gonzales			
	te if, filing) First Name Middle Name Last Name	_		
United	d States Bankruptcy Court for the: DISTRICT OF OREGON	_		
ı	number			
(if know	vn)		_	cif this is an ded filing
	cial Form 106Sum	a4: a .a		
	nmary of Your Assets and Liabilities and Certain Statistical Infor complete and accurate as possible. If two married people are filing together, both are equally re			12/15
inform	nation. Fill out all of your schedules first; then complete the information on this form. If you are foriginal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.			
Part 1	<u> </u>			
Tarti	Outilinatize Four Assets		Your a	anata.
				of what you own
1. S	Schedule A/B: Property (Official Form 106A/B)		¢	0.00
	1a. Copy line 55, Total real estate, from Schedule A/B		\$	
1	1b. Copy line 62, Total personal property, from Schedule A/B		\$	41,020.00
1	1c. Copy line 63, Total of all property on Schedule A/B		\$	41,020.00
Part 2	2: Summarize Your Liabilities			
				abilities t you owe
0 (	School de D. Conditions Who House Claims Convert by Drawout (Official Form 400D)		Amoun	t you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, <i>Amount of claim,</i> at the bottom of the last page of Part 1 of So	chedule D	\$	42,392.00
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		\$	7,100.00
	3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		· —	,
3	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		\$	17,664.00
	Your tot	tal liabilities	\$	67,156.00
Part 3	Summarize Your Income and Expenses			
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		\$	3,967.00
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J		\$	3,440.00
Part 4	4: Answer These Questions for Administrative and Statistical Records			
_	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the	court with you	r other sch	nedules.
7. V	■ Yes What kind of debt do you have?			

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,374.00

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	7,100.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	7,100.00

Fill in	this infor	mation to identify your	case and this filing:				olsendaines.com
Debto			-				oloonidaioolooni
Debic	,, ,	Christopher Dale (		ast Name			
Debto	or 2	Carla Denise Gon	zales				
(Spouse	e, if filing)	First Name	Middle Name L	ast Name			
United	d States Ba	ankruptcy Court for the:	DISTRICT OF OREGON				
Case	number _						Check if this is an amended filing
_		orm 106A/B					
Scl	nedul	le A/B: Prop	erty				12/15
■ N □ Y	No. Go to Pa	rt 2. is the property?  Your Vehicles	e interest in any residence, building, la				
someo	one else dri rs, vans, tr	ves. If you lease a vehicl	e, also report it on <i>Schedule G: Exec</i> ility vehicles, motorcycles				noo you ciiii ulu
3.1	-	Ford Escape	Who has an interest in the p □ □ Debtor 1 only	roperty? Check one	the amount of	any secured cl	s or exemptions. Put aims on <i>Schedule D:</i> Secured by Property.
,	Year:	2018 te mileage:	Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors		Current value entire proper	e of the C	current value of the ortion you own?
			Check if this is communi (see instructions)	ty property	\$30,	000.00	\$30,000.00
3.2	Model:	Fiat	Who has an interest in the p	roperty? Check one	the amount of	any secured cl	s or exemptions. Put aims on Schedule D: Secured by Property.
	Year:	2012	Debtor 2 only		Current value	of the C	urrent value of the
	Approxima	te mileage:	Debtor 1 and Debtor 2 only	ý	entire proper		ortion you own?
	Other infor	mation:	At least one of the debtors	and another			
			☐ Check if this is communi (see instructions)	ity property	\$4,	500.00	\$4,500.00

Official Form 106A/B Schedule A/B: Property page 1

		Christopher Darla Denise	Dale Gonzales Gonzales		Case	number (if known)	
Ex				and other recreational vehicles, oth vatercraft, fishing vessels, snowmobi			
_	Yes						
4.1	Make:	Hooligan		Who has an interest in the propert	ty? Check one	Do not deduct secur	ed claims or exemptions. Put
	Model:	Scooter		Debtor 1 only		the amount of any se	ecured claims on Schedule D: Claims Secured by Property.
	Year:			Debtor 2 only		Current value of the	e Current value of the
	Other in	formation:		<ul><li>■ Debtor 1 and Debtor 2 only</li><li>□ At least one of the debtors and a</li></ul>		entire property?	portion you own?
	Other in	iomation.		Check if this is community pro (see instructions)		\$800.00	\$800.00
.p	ages you	have attache		wn for all of your entries from Parte that number here			\$35,300.00
		·		nterest in any of the following iten	ns?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E		,	ces, furniture, linen	ods and Furniture			\$3,000.00
		Televisions a including cell		deo, stereo, and digital equipment; c media players, games	omputers, printers,	scanners; music col	lections; electronic devices
			Electronics				\$1,500.00
E		other collection	figurines; paintings ons, memorabilia, c	s, prints, or other artwork; books, pict collectibles	ures, or other art ob	ojects; stamp, coin, o	r baseball card collections;
Ε	xamples:	for sports an Sports, photo musical instru	graphic, exercise, a	and other hobby equipment; bicycles	, pool tables, golf cl	lubs, skis; canoes an	d kayaks; carpentry tools;
	I No I Yes. De	scribe					
_		: Pistols, rifles	s, shotguns, ammur	nition, and related equipment			
	No Yes. De	scribe					
	Clothes Examples I No I Yes. De		othes, furs, leather	coats, designer wear, shoes, access	ories		

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1 Debtor 2	Christopher Dale ( Carla Denise Gon			Case number (if known)	
					Ф700.00
	Clo	thing			\$700.00
☐ No		, costume jewelry, enga	gement rings, wedding rings, heirloom	n jewelry, watches, gems, go	ld, silver
	Jev	velry			\$300.00
Exan ■ No □ Yes	farm animals  Inples: Dogs, cats, birds,  Describe  Input the personal and hour		not already list, including any healt	th aids you did not list	
	s. Give specific informat		Part 3, including any entries for page	os vou have attached	
				es you have attached	\$5,500.00
Part 4: D	escribe Your Financial A	ssets			
Do you o	own or have any legal o	or equitable interest ir	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	nples: Money you have i		ome, in a safe deposit box, and on har	nd when you file your petition	1
■ Yes				Cash on hand	\$20.00
			ounts; certificates of deposit; shares ir s with the same institution, list each.	n credit unions, brokerage ho	ouses, and other similar
	i		Institution name:		
	17	.1. Checking	USAA Federal Savings Ba	nk	\$200.00
Exan	s, mutual funds, or pu		okerage firms, money market account	s	
■ No □ Yes		Institution or issuer	name:		
joint	oublicly traded stock a venture	and interests in incorp	orated and unincorporated busines	sses, including an interest	in an LLC, partnership, and
■ No □ Yes	s. Give specific informat	ion about them Name of entity:		% of ownership:	
Nego	otiable instruments inclu	de personal checks, ca	otiable and non-negotiable instrume shiers' checks, promissory notes, and ansfer to someone by signing or delive	money orders.	
	rm 106A/B		Schedule A/B: Property		page 3

Case 19-63025-tmr7 Doc 1 Filed 10/04/19

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Best Case Bankruptcy

	otor 1 otor 2	Christopher Dale Gonzales Carla Denise Gonzales	Case number (if known)	
	□ Yes.	Give specific information about them Issuer name:		
_	Exam	nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), 403	B(b), thrift savings accounts, or other pension or profit-sharing plan	s
_	■ No □ Yes.	List each account separately.  Type of account:	Institution name:	
_	Your s	ty deposits and prepayments hare of all unused deposits you have made so th oles: Agreements with landlords, prepaid rent, pu	nat you may continue service or use from a company blic utilities (electric, gas, water), telecommunications companies,	or others
			Institution name or individual:	
_	Annuit ■ No	ies (A contract for a periodic payment of money	to you, either for life or for a number of years)	
		Issuer name and description.		
		ts in an education IRA, in an account in a qua C. §§ 530(b)(1), 529A(b), and 529(b)(1).	lified ABLE program, or under a qualified state tuition progra	m.
	■ No □ Yes.	Institution name and description.	Separately file the records of any interests.11 U.S.C. § 521(c):	
_	Trusts ■ No	, equitable or future interests in property (oth	er than anything listed in line 1), and rights or powers exercis	able for your benefit
	☐ Yes.	Give specific information about them		
_		s, copyrights, trademarks, trade secrets, and oles: Internet domain names, websites, proceeds		
_		Give specific information about them		
_	Exam	es, franchises, and other general intangibles ples: Building permits, exclusive licenses, cooper	rative association holdings, liquor licenses, professional licenses	
	■ No □ Yes.	Give specific information about them		
Mo	ney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
_	Tax re	funds owed to you		
		Give specific information about them, including v	whether you already filed the returns and the tax years	
	Exam	support  oles: Past due or lump sum alimony, spousal sup	port, child support, maintenance, divorce settlement, property sett	lement
	■ No □ Yes.	Give specific information		
_	Exam	amounts someone owes you  bles: Unpaid wages, disability insurance payment benefits; unpaid loans you made to someon	ts, disability benefits, sick pay, vacation pay, workers' compensatine else	on, Social Security
	■ No □ Yes.	Give specific information		
	Interes	ets in insurance policies	avings account (HSA); credit, homeowner's, or renter's insurance	
		Name the insurance company of each policy and	d list its value. Schedule A/B: Property	page 4

Case 19-63025-tmr7 Doc 1 Filed 10/04/19

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Debtor 1	Christopher Dale Gonzales		
Debtor 2	Carla Denise Gonzales	Case number (if known)	
	Company name:	Beneficiary:	Surrender or refund value:
If you a someo	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insume has died.  Give specific information		eive property because
Examp ■ No —	against third parties, whether or not you have filed a lawsuit of les: Accidents, employment disputes, insurance claims, or rights to Describe each claim		
■ No	contingent and unliquidated claims of every nature, including  Describe each claim	counterclaims of the debtor and rights to	set off claims
35. Any fin	ancial assets you did not already list		
■ No	,		
☐ Yes.	Give specific information		
	he dollar value of all of your entries from Part 4, including any art 4. Write that number here	. • •	\$220.00
Part 5: Des	scribe Any Business-Related Property You Own or Have an Interest In.	List any real estate in Part 1.	
37. <b>Do you</b> o	own or have any legal or equitable interest in any business-related pro	perty?	
■ No. Go	to Part 6.		
☐ Yes. G	Go to line 38.		
	scribe Any Farm- and Commercial Fishing-Related Property You Own ou own or have an interest in farmland, list it in Part 1.	or Have an Interest In.	
46. <b>Do you</b>	own or have any legal or equitable interest in any farm- or co	mmercial fishing-related property?	
■ No.	Go to Part 7.		
☐ Yes	. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did N	lot List Above	
Examp	have other property of any kind you did not already list?  oles: Season tickets, country club membership		
■ No □ Yes.	Give specific information		
_,			
54. Add t	he dollar value of all of your entries from Part 7. Write that nui	mber nere	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$35,300.00		
57.	Part 3: Total personal and household items, line 15		\$5,500.00		
58.	Part 4: Total financial assets, line 36		\$220.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$41,020.00	Copy personal property total	\$41,020.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$41,020.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	mation to identify your	case:			olsendaines.com
Debtor 1	Christopher Dale (	Gonzales			
	First Name	Middle Name	Last Name		
Debtor 2	Carla Denise Gonz	zales			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGON			
Case number				ПС	heck if this is an
()					nended filing

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Specific laws that allow exemption  Check only one box for each exemption.
2018 Ford Escape Line from <i>Schedule A/B</i> : 3.1	\$30,000.00	\$2,925.00 C.C.P. § 703.140(b)(2)  100% of fair market value, up to any applicable statutory limit
2012 Fiat Line from <i>Schedule A/B</i> : 3.2	\$4,500.00	\$2,925.00 C.C.P. § 703.140(b)(2)  100% of fair market value, up to any applicable statutory limit
Hooligan Scooter Line from Schedule A/B: 4.1	\$800.00	\$800.00 C.C.P. § 703.140(b)(5)  100% of fair market value, up to any applicable statutory limit
Household Goods and Furniture Line from <i>Schedule A/B</i> : 6.1	\$3,000.00	\$3,000.00 C.C.P. § 703.140(b)(3)  100% of fair market value, up to any applicable statutory limit
Electronics Line from <i>Schedule A/B</i> : 7.1	\$1,500.00	\$1,500.00 C.C.P. § 703.140(b)(3)  100% of fair market value, up to any applicable statutory limit

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Debtor 1 Christopher Dale Gonzales
Debtor 2 Carla Denise Gonzales

Case number (if known)

Cana Demise Conzaies			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Clothing Line from Schedule A/B: 11.1	\$700.00	\$700.00	C.C.P. § 703.140(b)(3)
		100% of fair market value, up to any applicable statutory limit	
Jewelry Line from <i>Schedule A/B</i> : 12.1	\$300.00	\$300.00	C.C.P. § 703.140(b)(4)
Ellie IIolii Genedale 74 B. 12.1		☐ 100% of fair market value, up to any applicable statutory limit	
Cash on hand Line from <i>Schedule A/B</i> : 16.1	\$20.00	\$20.00	C.C.P. § 703.140(b)(5)
Ellie II olii ooliodale 775. To. T		☐ 100% of fair market value, up to any applicable statutory limit	
Checking: USAA Federal Savings Bank Line from Schedule A/B: 17.1	\$200.00	\$200.00	C.C.P. § 703.140(b)(5)
Line Hori Goredale A/D. 17.1		100% of fair market value, up to any applicable statutory limit	

3.	Are you c	laiming a	a homestead e	exemption of m	ore than \$170,350	)?	
	/ <b>^</b>						•.

(Subject to adjustment on 4/01/22 and every	3 years after that for cases filed	d on or after the date of adjustment.)
---	------------------------------------	--

■ No

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

☐ Yes

Filli	n this informat	tion to identify you	r case:				olsendaines.com
Deb	tor 1	Christopher Dale	Gonzales				
	-	First Name	Middle Name Last Name	9		-	
Deb	tor 2	Carla Denise Gor	nzales				
(Spou	se if, filing)	First Name	Middle Name Last Name	9		-	
Unit	ed States Bankı	ruptcy Court for the:	DISTRICT OF OREGON			-	
	e number						
(if kno	wn)					<del>-</del>	if this is an
						ameno	led filing
<b>⊃</b> ŧŧ:	oial Farm	106D					
	cial Form			_			
Sc	hedule D	: Creditors	Who Have Claims Secui	<u>red</u>	by Propert	у	12/15
s nee			f two married people are filing together, both arout, number the entries, and attach it to this form				
	,	ve claims secured by	your property?				
	_ *	•	is form to the court with your other schedule	s Vou	have nothing also t	o roport on this form	
	_			s. 10u	nave nothing else i	to report on this form.	
	Yes. Fill in al	I of the information b	pelow.				
Part	1: List All S	Secured Claims			0.1	0.1	0.1.0
			nore than one secured claim, list the creditor separ		Column A	Column B	Column C
			a particular claim, list the other creditors in Part 2. al order according to the creditor's name.	As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Capital One	Auto Finance			<b>CO 04 4 00</b>	¢4.500.00	ФE 044 00
۷.۱	Inc		Describe the property that secures the claim:		\$9,814.00	\$4,500.00	\$5,314.00
	Creditor's Name		2012 Fiat				
	c/o Richard I	O Fairbank,					
	CEO	- D-I	As of the date you file, the claim is: Check all that	t			
	7933 Prestor		apply.				
	Plano, TX 75		Contingent				
	Number, Street, Cit	ty, State & Zip Code	Unliquidated				
Who	owes the debt	? Check one	Disputed  Nature of lien. Check all that apply.				
	ebtor 1 only	. Official offic.	☐ An agreement you made (such as mortgage of	r 000Ur	ad		
	ebtor 2 only		car loan)	i Secui	eu		
_	ebtor 2 only ebtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)			
		debtors and another	☐ Judgment lien from a lawsuit				
_	heck if this clain		Other (including a right to offset) Vehicle	Lien			

community debt

Date debt was incurred 2016

Last 4 digits of account number

Deb	tor 1	Christopher Dale	Gonzale	es		Case number (if known)	OISE	endames.com		
		First Name	Middle Na			, ,				
Deb	tor 2	Carla Denise Gor	nzales							
		First Name	Middle Na	ame Last Name	_					
2.2	1	d Motor Credit npany LLC.		Describe the property that secures	the claim:	\$32,578.00	\$30,000.00	\$2,578.00		
	Credit	tor's Name		2018 Ford Escape						
	CE( One	Michael E. Bannist D e American Road Irborn, MI 48126	ter,	As of the date you file, the claim is apply.	: Check all that					
	Numb	er, Street, City, State & Zip	Code	☐ Unliquidated						
Who	Who owes the debt? Check one.			☐ Disputed  Nature of lien. Check all that apply.						
_	ebtor	- ,		☐ An agreement you made (such as car loan)	s mortgage or se	ecured				
	ebtor	1 and Debtor 2 only		☐ Statutory lien (such as tax lien, me	echanic's lien)					
ΠА	t least	one of the debtors and	another	☐ Judgment lien from a lawsuit						
		if this claim relates to unity debt	а	Other (including a right to offset)	Vehicle Lie	en				
Date	debt	was incurred 2018		Last 4 digits of account num	nber					
	141	L. II.		al and the same With the same		<b>#</b> 40,000,0				
		•		olumn A on this page. Write that nur the dollar value totals from all pages		\$42,392.0	10			
		trie last page of your f	orin, add	the dollar value totals from all pages	o.	\$42,392.0	)0			

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

FII	l in this inform	ation to identify your ca	se:					olsendair	nes.com
De	ebtor 1	Christopher Dale Go	nzales						
		First Name	Middle Nam	e	Last Name				
	ebtor 2	Carla Denise Gonzal							
(Sp	ouse if, filing)	First Name	Middle Nam	e	Last Name				
Un	ited States Ban	kruptcy Court for the:	DISTRICT OF	OREGON					
	se number						_	eck if this is a	n
	ficial Form						Į aiii	ended ming	
<b>3</b> c	:hedule E/	F: Creditors Wh	o Have U	<b>Jnsecured</b>	Claims			12/1	5
ny ch ch eft.	executory contra edule G: Execute edule D: Credito	accurate as possible. Use I acts or unexpired leases the ory Contracts and Unexpire rs Who Have Claims Secure inuation Page to this page. ber (if known).	at could result d Leases (Officed by Property.	in a claim. Also li cial Form 106G). D . If more space is i	ist executory contract To not include any cre needed, copy the Part	s on Schedule A/B: I ditors with partially s you need, fill it out,	Property (Official secured claims the number the entri	Form 106A/B) hat are listed in ies in the boxe	and on n s on the
Pa	rt 1: List All	of Your PRIORITY Unse	cured Claims	s					
1.	Do any creditor	s have priority unsecured o	laims against	you?					
	☐ No. Go to Pa	rt 2.							
	Yes.								
2.	identify what type possible, list the	priority unsecured claims. I e of claim it is. If a claim has b claims in alphabetical order a nan one creditor holds a partic	both priority and according to the	nonpriority amount creditor's name. If	ts, list that claim here a you have more than tw	nd show both priority a	and nonpriority am	nounts. As much	n as
	(For an explanat	ion of each type of claim, see	the instructions	s for this form in the	e instruction booklet.)				
						Total claim	Priority amount	Nonprior amount	rity
2.1	California	a Franchise Tax Board	l ast	4 digits of accou	nt number	\$100.00			\$0.00
	Priority Cred Bankrupt	ditor's Name cy, PIT MS A340		en was the debt in	-	Ψ100.00	<del></del>		Ψ0.00
	PO Box 2 Sacrame	nto, CA 95812-2952		£41- d-4 £11-	the eleipsics O				
		eet City State Zip Code the debt? Check one.		-	, the claim is: Check a	iii that appiy			
	Debtor 1 or			Contingent					
			Πı	Jnliquidated					
	Debtor 2 or	ıly		Disputed					
	Debtor 1 ar	nd Debtor 2 only	Туре	e of PRIORITY uns	secured claim:				
	☐ At least one	e of the debtors and another		Domestic support of	bligations				
	☐ Check if th	is claim is for a community	y debt 🔳 T	Taxes and certain o	ther debts you owe the	government			
		ubject to offset?			personal injury while yo				
	■ No			Other. Specify					
	☐ Yes			Ta	exes owing				

Cer PO Phil Num	rity Creditor's Name ntralized Insolvency Oper.	Last 4 digits of account number	Ф <b>7</b> 000 00		
Prior Cer PO Phil Num	rity Creditor's Name		\$7,000.00	\$7,000.00	\$0.00
Phil Num	Box 7346	When was the debt incurred?			φο.σο
	ladelphia, PA 19101-7346				
\A/la = :==	ber Street City State Zip Code	As of the date you file, the claim is: Check all that	apply		
_	curred the debt? Check one.	☐ Contingent			
_	tor 1 only	☐ Unliquidated			
☐ Debt	tor 2 only	☐ Disputed			
■ Debt	tor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
☐ At le	ast one of the debtors and another	☐ Domestic support obligations			
☐ Che	ck if this claim is for a community debt	■ Taxes and certain other debts you owe the gover	rnment		
Is the c	laim subject to offset?	☐ Claims for death or personal injury while you wer	e intoxicated		
■ No		☐ Other. Specify			
☐ Yes		2018 taxes owing			
		2015 taxes owing			
		2014 taxes owing 2010 taxes owing			
		2009 taxes owing			
unsecure	d claim, list the creditor separately for each cla	alphabetical order of the creditor who holds each aim. For each claim listed, identify what type of claim it creditors in Part 3.If you have more than three nonprice.	t is. Do not list claims	already included in Part	t 1. If more
i dit z.				Total clair	n
4.1 Car	oital One Bank.	Last 4 digits of account number			\$811.00
Nonr c/o 168	priority Creditor's Name Sanjiv Yajnik, CEO O Capital One Dr _ean, VA 22101	When was the debt incurred?			Ψσσ
Num	ber Street City State Zip Code incurred the debt? Check one.	As of the date you file, the claim is: Check all the	hat apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
_		Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
■ D		☐ Student loans			
■ □ A □ C debt	Check if this claim is for a community		nent or divorce that y	ou did not	
■ □ A □ C debt	Check if this claim is for a community to the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreem		ou did not	

	Carla Denise Gonzales     Carla Denise Gonzales	Case number (if known)	
4.2	Centralized Business Solutions	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 1225 N Main St North Canton, OH 44720	When was the debt incurred?	Ψ0.00
-	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Notice Only	
4.3	Commonwealth Finance Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	245 Main St	When was the debt incurred?	
-	Scranton, PA 18519		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	☐ Contingent	
	_	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Notice Only	
4.4	Complete Payment Recovery Services Nonpriority Creditor's Name	Last 4 digits of account number	\$630.00
	POB 038997 Tuscaloosa, AL 35403	When was the debt incurred?	
-	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify Collection	

Debtor Debtor	1 Christopher Dale Gonzales 2 Carla Denise Gonzales					
4.5	Consolidated Communications	Last 4 digits of account number	\$368.00			
	Nonpriority Creditor's Name 9766 Waterman Road Elk Grove, CA 95624	When was the debt incurred?				
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	Полетили				
	Debtor 2 only	☐ Contingent ☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Utility				
4.6	Convergent Outsourcing, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00			
	c/o CEÓ Michael G. Meyer 800 SW 39th Street Renton, WA 98057	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Notice Only				
4.7	DIRECTV LLC.	Last 4 digits of account number	\$559.00			
	Nonpriority Creditor's Name Attn: Bankruptcies	When was the debt incurred?				
	POB 6550 Greenwood Village, CO 80155-6550 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.  Debtor 1 only	П				
	Debtor 2 only	☐ Contingent				
	_	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Utility				
		opoon,				

Official Form 106 E/F

Debtor 1 Christopher Dale Gonzales  Debtor 2 Carla Denise Gonzales  Case number (if known)					
4.8	ECMC.  Nonpriority Creditor's Name 111 Washington Ave S. Suite 1400	Last 4 digits of account number  When was the debt incurred?	\$7,203.00		
	Minneapolis, MN 55401  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only				
	_ ,	☐ Disputed  Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Collection			
4.9	Enhanced Recovery Company, LLC. Nonpriority Creditor's Name	Last 4 digits of account number	\$1,231.00		
	c/o Marty Sarim, President 8014 Bayberry Rd. Jacksonville, FL 32256	When was the debt incurred?			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only				
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated			
		☐ Disputed  Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify Collection			
4.1	General Emergency Medical Spec	Last 4 digits of account number	\$230.00		
U	Nonpriority Creditor's Name 400 Wabash Ave	When was the debt incurred?	· · · · · · · · · · · · · · · · · · ·		
	Akron, OH 44307  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	□ Yes	■ Other. Specify Medical			
	<del></del>	— Garer, openity			

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

	or 2 Carla Denise Gonzales	Case number (if known)	
4.1	NetCredit.	Last 4 digits of account number	\$3,831.00
1	Nonpriority Creditor's Name		40,001.00
	175 W. Jackson Blvd, Suite 1000 Chicago, IL 60604	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
		Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	□ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not	
	_	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	■ Other. Specify Credit	
4.1	Pearl Investment Company	Last 4 digits of account number	\$1,327.00
2	Nonpriority Creditor's Name		Ψ1,021100
	931 Hartz Way Ste. 200 Danville, CA 94526	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	☐ Yes	■ Other. Specify Credit	
4.1	Receivables Performance	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 20818 44th Ave W Ste 140	When was the debt incurred?	
	Lynnwood, WA 98036  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Notice Only	
		Outon Opeony	

	or 1 Christopher Dale Gonzales or 2 Carla Denise Gonzales	Case number (if known)	
4.1	RSH & Associates	Last 4 digits of account number	\$0.00
<u> </u>	Nonpriority Creditor's Name PO Box 14515	When was the debt incurred?	<u> </u>
	Lenexa, KS 66285		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Notice Only	
4.1 5	SAFE Credit Union.	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name PO Box 609000	When was the debt incurred?	
	North Highlands, CA 95660  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date you me, the stant is. Officer all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only		
		☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	ls the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Notice Only	
4.1	0 " 0 " "		<b>#004.00</b>
6	Security Collection	Last 4 digits of account number	\$921.00
	Nonpriority Creditor's Name 617 Soundside Road Edenton, NC 27932	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	`	
		☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	_	
	Is the claim subject to offset?	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection	

	r 2 Carla Denise Gonzales	Case number (if known)	
4.1	Southern Alabama Physicians LLC	Last 4 digits of account number	\$111.00
	Nonpriority Creditor's Name 4370 W Main St Dothan, AL 36305	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.1	T-Mobile.	Last 4 digits of account number	\$213.00
	Nonpriority Creditor's Name Bankruptcy Team POB 53410	When was the debt incurred?	
	Bellevue, WA 98015-3410	As of the date vary file, the plains in Chapter all that apply	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Utility	
4.1	Verizon Wireless Operational HQ.	Last 4 digits of account number	\$229.00
	Nonpriority Creditor's Name c/o CEO Lowell McAdam One Verizon Way	When was the debt incurred?	
	Basking Ridge, NJ 07920	_	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	По и	
	Debtor 2 only	☐ Contingent	
	Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Utility	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 9

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Debtor 1	Christopher Dale Gonzales
Debtor 2	Carla Denise Gonzales

Case	number	(if known)	١
------	--------	------------	---

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 7,100.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 7,100.00
	6f.	Student loans	6f.	\$ Total Claim 0.00
Total claims				
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 17,664.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 17,664.00

Fill in this inforr	nation to identify your	case:		olsendaines.com
Debtor 1	Christopher Dale C	Gonzales Middle Name	Last Name	
Debtor 2	Carla Denise Gon:	zales		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	DISTRICT OF OREGON		
Case number _				Check if this is an

### Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

		Name, Number	, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
1					
	Name				
					<u> </u>
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
2 2	City		State	ZIP Code	
2.3	- N				_
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

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Fill in thi	s information to identify your	case:				olsendaines.com
Debtor 1	Christopher Dale					
	First Name	Middle Name	Last Name	_		
Debtor 2	Carla Denise Gor					
(Spouse if, fi	ing) First Name	Middle Name	Last Name			
United St	ates Bankruptcy Court for the:	DISTRICT OF OREGO	N			
Case nun	nber					
(if known)						Check if this is an
						amended filing
Ott: -: -	J. Cower 4001					
	al Form 106H					
Sche	dule H: Your Cod	lebtors				12/15
1. Do	e and case number (if known you have any codebtors? (If	,		as a codebtor.		
■ No						
☐ Ye	S					
	thin the last 8 years, have yo na, California, Idaho, Louisiana					d territories include
■ No	. Go to line 3.					
☐ Ye	s. Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?			
in lin Form	lumn 1, list all of your codeb e 2 again as a codebtor only 106D), Schedule E/F (Officia column 2.	if that person is a guara	ntor or cosigner. Make	sure you have listed t	he credito	on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The cre Check all schedule		hom you owe the debt
				Officer all correction	co mai app	.y.
3.1	N			_ Schedule D, lir		
	Name			☐ Schedule E/F,		
				☐ Schedule G, lir	ne	
	Number Street			_		
	City	State	ZIP Code			
3.2	Name			_		
	Hamo			☐ Schedule E/F,		
				☐ Schedule G, lir	ıe	
	Number Street	Stata	ZID Codo			
	City	State	ZIP Code			

Schedule H: Your Codebtors

Fill	in this information to identify your ca	ase:					olsendaine	es.com	
Deb	otor 1 Christopher I	Dale Gonzales							
	otor 2 Carla Denise	Gonzales							
Uni	ted States Bankruptcy Court for the	: DISTRICT OF OREGO	NC						
(If kn	fficial Form 106l					13 income a	ent showing postpetition chass of the following date:	apter	
	chedule I: Your Inc	omo				MM / DD/ Y	YYY	12/15	
sup <sub>l</sub> spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filing wi	ng jointly, and your s th you, do not includ	pouse i le infori	s liv natio	ing with you, incluon about your spo	ide information about youse. If more space is nee	ur eded,	
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing spouse		
	If you have more than one job,		☐ Employed			■ Emplo	■ Employed		
	attach a separate page with information about additional	Employment status	■ Not employed			☐ Not er	☐ Not employed		
	employers.	Occupation				Project	Coordinator		
	Include part-time, seasonal, or self-employed work.	Employer's name				Express	Employment		
	Occupation may include student or homemaker, if it applies.	Employer's address				3523 Arrowhead Drive, Suite 100 Medford, OR 97504			
		How long employed th	here?			3	months	_	
Par	Give Details About Mor	nthly Income							
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to re	port for	any l	line, write \$0 in the	space. Include your non-fil	ing	
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	emplo	oyers for that perso	n on the lines below. If you	need	
						For Debtor 1	For Debtor 2 or non-filing spouse		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$\$		
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$0.00		
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$2,592.00		

Official Form 106I Schedule I: Your Income page 1

Case number (if known)

	Copy	/ line 4 here	4.	For D	0.00		ebtor 2 or iling spouse 2,592.00	
5.		all payroll deductions:		·	0.00	Ť——	2,002.00	
0.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g.	\$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	387.00 0.00 0.00 0.00 225.00 0.00 0.00 0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	612.00	
7.	Calcu	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	1,980.00	
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  VA Disability  Pension or retirement income  Other monthly income. Specify:	8c. 8d. 8e.	\$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	1,987.00	
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		0.00 + \$	3,96	67.00 = \$	3,967.00
	Add t	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
	other Do no Speci	the amount in the last column of line 10 to the amount in line 11. The rethat amount on the Summary of Schedules and Statistical Summary of Cer	ur depen ot availab esult is th	le to pa	y expenses liste	ed in <i>Sc</i> — come.	11. +\$	0.00
13.	Do yo	ou expect an increase or decrease within the year after you file this for No.	m?				Combine monthly	ed

Official Form 106I Schedule I: Your Income page 2

Yes. Explain: Debtor is applying for social security disability

Fill	in this informs	ation to identify yo	our case:			Ī			olsendaines.c	οm
									oisendaines.c	JIII
Deb	tor 1	Christopher D	Dale Gonz	ales		Cr		this is: amended filing		
Deb	tor 2	Carla Denise	Gonzales	5				ū	ving postpetition chapte	r
(Spc	ouse, if filing)					_			the following date:	
Unit	ed States Bank	ruptcy Court for the	: DISTRI	CT OF OREGON			MM	I / DD / YYYY		
Cas	e number									
(If kr	nown)									
Of	fficial Fo	orm 106J								
Sc	chedule	J: Your	Exper	ises					12	2/15
Be a info nun	as complete ormation. If m mber (if know	and accurate as nore space is ne n). Answer ever	possible. eded, atta ry question	If two married people ar	e filing together, b form. On the top of	oth are ed f any add	qually itional	responsible fo pages, write y	r supplying correct our name and case	
Par 1.	ls this a join	ribe Your House nt case?	hold							
	☐ No. Go to									
	Yes. Doe	es Debtor 2 live i	in a separa	ate household?						
	■ N		st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of D	ebtor 2	2.		
2.	Do you hav	e dependents?	■ No							
	Do not list D Debtor 2.	•	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto			Dependent's age	Does dependent live with you?	
	Do not state	the							□ No	
	dependents	names.							☐ Yes	
									□ No □ Yes	
									□ No	
									☐ Yes	
									□ No	
3.	expenses of	penses include of people other the d your depende	han $_{m \Box}$	No Yes					☐ Yes	
Par	t 2: Estim	nate Your Ongoi	na Monthi	v Expenses						
Est exp	imate your e	xpenses as of you	our bankrı	uptcy filing date unless y y is filed. If this is a supp						
the		h assistance an		government assistance it luded it on Schedule I: )				Your expe	enses	
(0		,								
4.		or home owners and any rent for the		ses for your residence. In r lot.	nclude first mortgag	e 4.	\$_		1,295.00	
	If not include	ded in line 4:								
	4a. Real	estate taxes				4a.	\$		0.00	
		erty, homeowner's				4b.	_		50.00	
		· ·		pkeep expenses		4c.	: —		0.00	
5.		eowner's associat		dominium dues o <b>ur residence,</b> such as ho	me equity loans	4d. 5.			0.00	
			, .		540, 100.10	٥.	· —		3.00	

ebtor 1 Debtor 2		her Dale Gonzales inise Gonzales	Case num	ber (if known)	
	lition.			_	
. <b>Uti</b> l 6a.	lities: Flectricity	, heat, natural gas	6a.	\$	150.00
6b.		wer, garbage collection	6b.		50.00
6c.		e, cell phone, Internet, satellite, and cable services	6c.		300.00
6d.			6d.		0.00
		ekeeping supplies	7.	•	600.00
		children's education costs	8.	·	0.00
		lry, and dry cleaning	9.		75.00
	-	products and services	10.		125.00
	_	ntal expenses	11.	· ·	125.00
		Include gas, maintenance, bus or train fare.		<u> </u>	123.00
	•	ar payments.	12.	\$	275.00
		clubs, recreation, newspapers, magazines, and books	13.	\$	110.00
		ributions and religious donations	14.		0.00
	urance.			*	0.00
		nsurance deducted from your pay or included in lines 4 or 20.			
	a. Life insura	, , ,	15a.	\$	0.00
15b	. Health ins	surance	15b.	\$	0.00
150	. Vehicle in	surance	15c.	\$	160.00
15c	I. Other insu	rance. Specify:	15d.	\$	0.00
		nclude taxes deducted from your pay or included in lines 4 or 20.		*	0.00
	ecify:	, , , , , , , , , , , , , , , , , , ,	16.	\$	0.00
. Ins	tallment or I	ease payments:			
17a	a. Car paym	ents for Vehicle 1	17a.	\$	0.00
17b	. Car paym	ents for Vehicle 2	17b.	\$	0.00
17c	. Other. Sp	ecify:	17c.	\$	0.00
	l. Other. Sp		17d.	\$	0.00
. You	ur payments	of alimony, maintenance, and support that you did not report as	<del></del>		
dec	ducted from	your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
. Oth	ner payment	s you make to support others who do not live with you.		\$	0.00
	ecify:		19.		
		erty expenses not included in lines 4 or 5 of this form or on School			
		s on other property	20a.		0.00
	<ol> <li>Real estat</li> </ol>		20b.	\$	0.00
		homeowner's, or renter's insurance	20c.	\$	0.00
20c	l. Maintenar	nce, repair, and upkeep expenses	20d.	\$	0.00
20e	e. Homeown	er's association or condominium dues	20e.	\$	0.00
. Oth	ner: Specify:	Misc (gifts, unexpected expenses, etc)	21.	+\$	125.00
Cal	ouloto vour	monthly expanses			
	a. Add lines 4	monthly expenses		\$	2 440 00
		2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	3,440.00
				l :	
220	. Add line 22	a and 22b. The result is your monthly expenses.		\$	3,440.00
3. Cal	culate your	monthly net income.			
	•	12 (your combined monthly income) from Schedule I.	23a.	\$	3,967.00
	. ,	r monthly expenses from line 22c above.	23b.	*	3,440.00
~	- / / 500	, 1			3,110.00
230		your monthly expenses from your monthly income. t is your monthly net income.	23c.	\$	527.00
For	example, do yo dification to the	an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect you terms of your mortgage?			e or decrease because of a
		Evaloin horo:			
⊔`	Yes.	Explain here:			

Fill in this infor	mation to identify your	case:			olsendaines.com
Debtor 1	Christopher Dale C		LastNama		
<b>D</b> 17 0		Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Carla Denise Gonz	Zales Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGO	DN		
Case number					
(if known)					Check if this is an amended filing
Official Forr					
Declarat	tion About a	ın Individua	I Debtor's Sched	ules	12/15
You must file thi	is form whenever you fi	le bankruptcy schedulen connection with a bar	onsible for supplying correct infor es or amended schedules. Making nkruptcy case can result in fines u	a false statement, con	
You must file thi obtaining money years, or both. 1	is form whenever you fi y or property by fraud in	le bankruptcy schedulen connection with a bar	es or amended schedules. Making	a false statement, con	
You must file thi obtaining money years, or both. 1	is form whenever you fi y or property by fraud in 8 U.S.C. §§ 152, 1341, 1	le bankruptcy schedulen connection with a bar 519, and 3571.	es or amended schedules. Making	a false statement, con p to \$250,000, or impri	
You must file thi obtaining money years, or both. 1	is form whenever you fi y or property by fraud in 8 U.S.C. §§ 152, 1341, 1	le bankruptcy schedulen connection with a bar 519, and 3571.	es or amended schedules. Making nkruptcy case can result in fines u	a false statement, con p to \$250,000, or impri	
You must file thi obtaining money years, or both. 1  Sign  Did you pa	is form whenever you fi y or property by fraud in 8 U.S.C. §§ 152, 1341, 1	le bankruptcy schedulen connection with a bar 519, and 3571.	es or amended schedules. Making nkruptcy case can result in fines u	a false statement, con p to \$250,000, or impri	sonment for up to 20
You must file thi obtaining money years, or both. 1  Sign  Did you pa  No  Yes. N	is form whenever you fi y or property by fraud in 8 U.S.C. §§ 152, 1341, 1  In Below  The property by fraud in y or agree to pay some  Name of person	le bankruptcy schedulen connection with a bar 519, and 3571.	es or amended schedules. Making nkruptcy case can result in fines u	a false statement, con p to \$250,000, or impri	sonment for up to 20
You must file thi obtaining money years, or both. 1  Sign  Did you pa  No Yes. N  Under pena that they are	is form whenever you fi y or property by fraud it 8 U.S.C. §§ 152, 1341, 1  In Below  In y or agree to pay some  Name of person	le bankruptcy schedulen connection with a ban 519, and 3571.  one who is NOT an attornal that I have read the sur	es or amended schedules. Making nkruptcy case can result in fines u	a false statement, con p to \$250,000, or impri	sonment for up to 20
You must file thi obtaining money years, or both. 1  Sign  Did you pa  No Yes. N  Under pena that they are X /s/ Christo	is form whenever you fi y or property by fraud it 8 U.S.C. §§ 152, 1341, 1  In Below  The property by fraud it and the property by f	le bankruptcy schedulen connection with a ban 519, and 3571.  one who is NOT an attornal that I have read the sur	es or amended schedules. Making nkruptcy case can result in fines un prince to help you fill out bankruptch mmary and schedules filed with the	a false statement, con p to \$250,000, or impri	sonment for up to 20

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Best Case Bankruptcy

Fill in this info	ormation to identify you	r case:			olsendaines.com
Debtor 1	Christopher Dale	Gonzales			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Carla Denise Go	nzales  Middle Name	Last Name		
	Bankruptcy Court for the:	DISTRICT OF OREGON			
Officed States L	Sankruptcy Court for the.	DISTRICT OF ORLGON			
Case number (if known)				_	Check if this is an mended filing
Official F	orm 107				
		Affairs for Individ	duals Filing for B	ankruptcy	4/19
information. If number (if kno	more space is needed, wn). Answer every que	attach a separate sheet to	this form. On the top of an	equally responsible for sup y additional pages, write you	
1. What is yo	our current marital statu	ıs?			
■ Marrie	ed narried				
2. During the	e last 3 years, have you	lived anywhere other than	where you live now?		
□ No					
	List all of the places you	ived in the last 3 years. Do no	ot include where you live now	<i>1</i> .	
Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
	ndis Avenue, Apt. 1 ael, CA 95608	From-To: 5/2017 to 07/1/2019	Same as Debtor	I	Same as Debtor 1 From-To:
states and territ	ories include Arizona, Ca	lifornia, Idaho, Louisiana, Ne hedule H: Your Codebtors (Of	vada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and V	
Fill in the to	otal amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
□ No ■ Yes. F	Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	1 of current year until iled for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$7,524.00
		☐ Operating a business		☐ Operating a business	
Official Form 107		Statement of Financial Aff	airs for Individuals Filing for B	ankruptcy	page '

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Best Case Bankruptcy

page 1

			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	ast calendar year uary 1 to Decemb		■ Wages, commissions, bonuses, tips	\$5,993.00	■ Wages, commissions, bonuses, tips	\$30,060.00
			☐ Operating a business		☐ Operating a business	
	he calendar year uary 1 to Decemb		☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$36,053.00
			☐ Operating a business		☐ Operating a business	
[ [	_	Ü	ome from each source separa	tely. Do not include income t	,	
			Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
				,		
	n January 1 of cul late you filed for l			\$0.00	Disability	\$15,560.0
the d	ate you filed for l	oankruptcy:		<u> </u>	Disability	\$15,560.0
	ate you filed for l	oankruptcy:	Made Before You Filed for	<u> </u>	Disability	\$15,560.0
Part	3: List Certain  Are either Debtor  No. Neither	Payments You  1's or Debtor 2 Debtor 1 nor I	Made Before You Filed for 's debts primarily consume Debtor 2 has primarily consumants personal, family, or househo	Bankruptcy r debts? umer debts. Consumer debts	· · · · · · · · · · · · · · · · · · ·	
Part	3: List Certain  Are either Debtor  No. Neither individu	Payments You  1's or Debtor 2 Debtor 1 nor I al primarily for a	o's debts primarily consume Debtor 2 has primarily consuments a personal, family, or househouse ore you filed for bankruptcy, die 7.	Bankruptcy r debts? umer debts. Consumer debts ld purpose." id you pay any creditor a tota	s are defined in 11 U.S.C. § 10	01(8) as "incurred by ar
Part	3: List Certain  Are either Debtor  No. Neither individu  During 1  No   No   Neither   No   No   No   No   No   No   No   N	Payments You  1's or Debtor 2 Debtor 1 nor I al primarily for a the 90 days befor Go to line 7 s List below on paid that or not include	a's debts primarily consume Debtor 2 has primarily consume personal, family, or househouse you filed for bankruptcy, divided the creditor to whom you pareditor. Do not include payment payments to an attorney for the Debtor 2 has primarily and the creditor.	Bankruptcy  r debts?  umer debts. Consumer debts Id purpose."  id you pay any creditor a tota  id a total of \$6,825* or more ints for domestic support oblighis bankruptcy case.	s are defined in 11 U.S.C. § 10 of \$6,825* or more?  In one or more payments and lations, such as child support	01(8) as "incurred by ar the total amount you and alimony. Also, do
Part	3: List Certain  Are either Debtor  No. Neither individu  During 1  No Ye  * Subjet  Yes. Debtor	Payments You  1's or Debtor 2 Debtor 1 nor I al primarily for a the 90 days befor Go to line 7 s List below of paid that or not include ect to adjustment  1 or Debtor 2 of	each creditor to whom you pared to both to be seen to b	Bankruptcy  r debts?  umer debts. Consumer debts Id purpose."  id you pay any creditor a tota  id a total of \$6,825* or more ints for domestic support oblighis bankruptcy case. s after that for cases filed on  umer debts.	s are defined in 11 U.S.C. § 10 of \$6,825* or more?  In one or more payments and lations, such as child support or after the date of adjustmen	01(8) as "incurred by ar the total amount you and alimony. Also, do
Part	3: List Certain  Are either Debtor  No. Neither individu  During 1  No Ye  * Subje	Payments You  1's or Debtor 2 Debtor 1 nor I al primarily for a the 90 days befor Go to line 7 s List below of paid that or not include ect to adjustment  1 or Debtor 2 of the 90 days befor	each creditor to whom you paired to a 1/22 and every 3 year or both have primarily consular.	Bankruptcy  r debts?  umer debts. Consumer debts Id purpose."  id you pay any creditor a tota  id a total of \$6,825* or more ints for domestic support oblighis bankruptcy case. s after that for cases filed on  umer debts.	s are defined in 11 U.S.C. § 10 of \$6,825* or more?  In one or more payments and lations, such as child support or after the date of adjustmen	01(8) as "incurred by ar the total amount you and alimony. Also, do
Part	3: List Certain  Are either Debtor  No. Neither individu  During  No. Veither individu  Veither individu  During  Veither individu	Payments You  1's or Debtor 2 Debtor 1 nor I al primarily for a the 90 days befor Go to line 7 s List below of paid that or not include ect to adjustment  1 or Debtor 2 of the 90 days befor Go to line 7 s List below of include pay	each creditor to whom you paired to a 1/22 and every 3 year or both have primarily consular.	Bankruptcy  r debts?  umer debts. Consumer debts Id purpose."  id you pay any creditor a tota id a total of \$6,825* or more ints for domestic support oblighis bankruptcy case. is after that for cases filed on  umer debts. id you pay any creditor a tota id a total of \$600 or more and	s are defined in 11 U.S.C. § 10  I of \$6,825* or more?  In one or more payments and ations, such as child support or after the date of adjustment of \$600 or more?	01(8) as "incurred by ar the total amount you and alimony. Also, do it.

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	ebtor 1 Christopher Dale Gonzales ebtor 2 Carla Denise Gonzales		Cas	se number (if know.	n)					
Dei	Caria Deriise Gorizales			se namber (// know.						
7.	Within 1 year before you filed for bankrup Insiders include your relatives; any general pof which you are an officer, director, person a business you operate as a sole proprietor. alimony.	partners; relatives of any ger in control, or owner of 20% of	neral partners; partners or more of their voting	erships of which y g securities; and	ou are a gener any managing a	al partner; corporations agent, including one for				
	<ul><li>No</li><li>Yes. List all payments to an insider.</li></ul>									
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment				
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.									
	No									
	☐ Yes. List all payments to an insider									
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment ditor's name				
Pa	irt 4: Identify Legal Actions, Repossession	ons, and Foreclosures								
9.	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.  No Yes. Fill in the details.									
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case				
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details bel		erty repossessed, f	oreclosed, garn	ished, attache	d, seized, or levied?				
	<ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>									
	Creditor Name and Address	Describe the Property		Dat	е	Value of the				
		Explain what happene	d			property				
11.	Within 90 days before you filed for bankri accounts or refuse to make a payment be  No Yes. Fill in the details.		cluding a bank or fir	nancial institutio	on, set off any a	amounts from your				
	Creditor Name and Address	Describe the action the	e creditor took	Dat take	e action was en	Amount				
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or		erty in the possess	ion of an assigr	ee for the ben	efit of creditors, a				
	■ No □ Yes									
Pa	List Certain Gifts and Contributions	3								
13.	Within 2 years before you filed for bankru  No	ıptcy, did you give any gift	s with a total value	of more than \$6	600 per person	?				
	Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person	Describe the gifts			es you gave gifts	Value				
	Person to Whom You Gave the Gift and Address:									

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

	btor 1 Christopher Dale Gonzales btor 2 Carla Denise Gonzales		C	Case number	(if known)	
14.	Within 2 years before you filed for bank  ■ No □ Yes. Fill in the details for each gift or			s with a tota	I value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	total	Describe what you contributed		Dates you contributed	Value
Pai	rt 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	uptcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the log the amount that insurance has paid. Log claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost
Pai	rt 7: List Certain Payments or Transfer	's				
16.	Within 1 year before you filed for bankructorsulted about seeking bankruptcy or Include any attorneys, bankruptcy petition  □ No ■ Yes. Fill in the details.	preparir	ng a bankruptcy petition?			ty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
	Evergreen Financial Counseling POB 1562 Portland, OR 97062-9997		Certificate of Credit Counseling		10/02/19	\$19.99
	OlsenDaines PO Box 12829 Salem, OR 97309		Attorney Fees		10/2019	\$200.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer tha	ditors o	r to make payments to your creditors		r transfer any proper	rty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bank transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have al	ur busin s made a	ess or financial affairs? as security (such as the granting of a se			
	Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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	btor 1 Christopher Dale Gonzales btor 2 Carla Denise Gonzales			Case nun	nber (if known)	
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-p. No ☐ Yes. Fill in the details.		any property to a	a self-settle	ed trust or similar devic	e of which you are a
	Name of trust	Description and	value of the pro	operty trans	sferred	Date Transfer was made
Par	rt 8: List of Certain Financial Accounts, In	nstruments. Safe Depos	sit Boxes. and S	torage Uni	ts	made
20.		cy, were any financial a	accounts or inst	ruments he	eld in your name, or for	•
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	SAFE Credit Union. PO Box 609000 North Highlands, CA 95660	XXXX-	■ Checking □ Savings □ Money Ma □ Brokerage □ Other		May 2019	\$0.00
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	or bankruptcy, a	any safe de	posit box or other depo	ository for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Address (Number, Street, City,		the contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	ur home within	1 year befo	re you filed for bankrup	otcy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
Pai	Identify Property You Hold or Control	ol for Someone Else				_
23.	Do you hold or control any property that so for someone.	omeone else owns? Inc	clude any prope	rty you bor	rowed from, are storing	g for, or hold in trust
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City Code)		Describe	the property	Value

#### Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

FOI	the purpose of Part 10, the following definitions	арріу.							
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.								
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or to own, operate, or utilize it, including disposal sites.								
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								
Rep	port all notices, releases, and proceedings that ye	ou know about, regardless of wher	n they occurred.						
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any release of hazardous material?								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.								
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Pai	rt 11: Give Details About Your Business or Con	nections to Any Business							
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?								
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or	equity securities of a corporation							
	No. None of the above applies. Go to Part	12.							

Official Form 107

**Business Name** 

(Number, Street, City, State and ZIP Code)

Address

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Describe the nature of the business

Name of accountant or bookkeeper

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Yes. Check all that apply above and fill in the details below for each business.

**Employer Identification number** 

Dates business existed

Do not include Social Security number or ITIN.

Debt Debt	or 1 Christopher Dale Gonzales or 2 Carla Denise Gonzales		Case number (if known)		
	Within 2 years before you filed for bankrup nstitutions, creditors, or other parties.	tcy, did you give	a financial statement to anyone about your business? Include all financial		
l [	■ No □ Yes. Fill in the details below.				
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued			
Part	12: Sign Below				
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that the answ are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connect with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Christopher Dale Gonzales /s/ Carla Denise Gonzales					
Christopher Dale Gonzales			Denise Gonzales		
Signature of Debtor 1		Signat	ture of Debtor 2		
Date	October 4, 2019	Date	October 4, 2019		
Did y∙ ■ No □ Ye	, -	ent of Financial A	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?		
■ No		·	help you fill out bankruptcy forms?  parer's Notice, Declaration, and Signature (Official Form 119).		